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indicated unless correct maintenance fee notifics	ed below or directed of	herwise in Block 1, by (a) specifying a new corre	spondence address; and/or	(b) indicating a sep	arate "FEE ADDRESS" fo
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26582		72010		Certificate	of Mailing or Trans	emission
HOLLAND & P.O BOX 8749 DENVER, CO 8			I he Stat add tran	reby certify that this Fee(es Postal Service with suf ressed to the Mail Stop smitted to the USPTO (57	s) Transmittal is bein ficient postage for fir ISSUE PEE address 1) 273-2885, on the	g deposited with the Unite st class mail in an envelop above, or being facsimil late indicated below.
						(Depositor's name
						(Signature
						(Date
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.
09/770,427	01/26/2001		Semih Secer	734	88.0022	7055
TITLE OF INVENTION	SYSTEM AND MET	OD FOR MANAGING	A COMMUNICATION N	ETWORK UTILIZING S	FATE-BASED POLI	ING
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$0	\$1510	08/09/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS			
JACOBS, LA		2457	709-223000			
1. Change of correspondence address or indication of "Fee Address" (37 CPR 1,503). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patient front page, list (1) the names of up to 3 registered patient attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 registered patient attorneys or agents. If no name is listed, no name will be printed.			
PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI	less an assignee is ident h in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NO	THE PATENT (print or ty data will appear on the p IT a substitute for filing an (B) RESIDENCE: (CITY Karnataka, I	atent. If an assignee is it assignment. and STATE OR COUNT		locument has been filed f
Please check the appropr	iate assignee category or	categories (will not be p	rinted on the patent):	Individual 🖾 Corporat	ion or other private gr	oup entity Governmen
4a. The following fee(s) Solution	io small entity discount p		tb. Payment of Foc(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is brerby authorized to charge the regulated fee(s), any deficiency, or credit any overpayment. to Deposit Account Number (0.92-6.23) (enclose an extra copy of this form)			
5. Change in Entity Sta a. Applicant claim	tus (from status indicate s SMALL ENTITY state		b. Applicant is no lon	ger claiming SMALL EN	TITY status. See 37 C	CFR 1.27(g)(2).
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be accepte tes Patent and Trademark	d from anyone other than it Office.	the applicant; a registered	attorney or agent; or	he assignee or other party
	/Herbert R. Schulz			Date August 9		
Typed or printed name Herbert R. Schulze			Registration No. 30,682			
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